

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/664,171 Confirmation No.: 3332
Applicant : Michi Garrison et al.
Filing Date : September 16, 2003
Title : METHOD AND APPARATUS FOR LOCALIZED DRUG DELIVERY
Group Art Unit : 3767
Examiner : Catherine Witczak
Docket No. : 13854.4002
Customer No. : 34313

Commissioner for Patents
Mail Stop RCE
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

I. **Submission required under 37 CFR § 1.114**

- A. Previously submitted
1. Consider the amendment(s)/reply under 37 CFR § 1.116 previously filed on _____
2. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
3. Other _____
- B. Enclosed
1. Response
2. Affidavit(s)/Declarations(s)

CERTIFICATE OF ELECTRONIC TRANSMISSION

I hereby certify that on the date listed below this paper (along with any paper referred to as being attached or enclosed) is being electronically transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: October 12, 2006



Mary L. Smith

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3. Information Disclosure Statement (IDS)
4. Other _____

II. Miscellaneous

- A. Suspension of action on the above-identified application is requested under 37 CFR § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR § 1.17(i) required.)
B. Other _____

III. Fees

- A. The Commissioner is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 15-0665
1. RCE fees (37 CFR §1.17(e)):

RCE Fee	\$790.00				
Claims filed or remaining after amendment	Highest number previously paid for				
Total Claims 23	20	= 3	x \$50.00	\$150.00	
Independent Claims 3	-	= 3	x \$200.00	\$0.00	
<input checked="" type="checkbox"/> Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.					
TOTAL OF ABOVE CALCULATIONS					\$470.00

2. Extension of time fee (37 CFR §§ 1.136 and 1.17)

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$60.00	\$120.00
<input type="checkbox"/> two months	\$225.00	\$450.00
<input type="checkbox"/> three months	\$510.00	\$1,020.00
<input type="checkbox"/> four months	\$795.00	\$1,590.00
<input type="checkbox"/> five months	\$1,080.00	\$2,160.00
TOTAL OF ABOVE CALCULATIONS		\$0.00

3. Other _____

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B. Check in the amount of \$_____ is enclosed

Respectfully submitted,

Dated: October 12, 2006

By: 
Kenneth S. Roberts
Reg. No. 38,358

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